

File with:
Iowa Ethics and Campaign
Disclosure Board
510 E. 12th Ste. 1A
Des Moines, Iowa 50319
Fax: 515-281-4073

FOR INSTRUCTIONS, SEE BACK OF FORM
DISCLOSURE SUMMARY PAGE

COMMITTEE NAME (Must be same as on Statement of Organization)

PAT GIBBS COMMITTEE

IMPORTANT: Indicate by # type of committee you are reporting for:

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC
(11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name

PATRICK GIBBS

Political Party (if applicable)

Office Sought

1ST WARD ALDERMAN

District (if Senate or House)

FORM

DR-2

(Rev. 07/2007)

DISCLOSURE
REPORT

For Office Use Only

Comm. # _____
Logged In _____
Scanned _____
Computer _____
Audited _____

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

Corinna P. P.
SIGNATURE OF PERSON FILING REPORT

563-349-0345
TELEPHONE

1-19-08
DATE SIGNED

I AM FILING A 1-19-08 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.

(report date)

Indicate by # ☒ 2

☐ CHECK IF AMENDMENT TO REPORT DATED _____

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

11-5-07

County & Local Committees, enter County in
which Election is held

SCOTT

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the
committee. This amount **MUST** be the same as the cash on hand at the end
of the last reporting period or must be zero if this is first report filed.)

\$

0

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (**also see in-kind below)

1675.00

Schedule F: Loans Received total (Attach Schedule F)

0

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

0

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL

\$

1675.00

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)

1640.44

Schedule F: Loan Repayments total (Attach Schedule F)

0

CASH ON HAND at the end of this reporting period (if final report balance must be zero)

\$

34.56

**UNPAID BILLS (From Schedule D - Attach Schedule D)

\$

0

**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

\$

0

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

\$

0

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES ☒ NO

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$

0

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

PAT GIBBS COMMITTEE

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE (If applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
10-23-07	ID# CK#	LINDA GREENLEE 815 MT VERNON DR DAVENPORT IOWA 52806		\$ 50.00	<input type="checkbox"/>
10-23-07	ID# CK#	John L Bush 5401 VICTORIA AVE DAVENPORT IOWA 52807		100.00	<input type="checkbox"/>
10-23-07	ID# CK#	Johanna Galler 1014 W 15TH ST DAVENPORT IA 52804		100.00	<input type="checkbox"/>
10-23-07	ID# CK#	James Russell 6401 UTICA Ridge Rd. DAVENPORT IA 52807		100.00	<input type="checkbox"/>
10-28-07	ID# CK#	JEFF HELMS 5 LOMBARD CT DAVENPORT IA 52803		50.00	<input type="checkbox"/>
10-31-07	ID# CK# 1072	TAXPAYERS United 219 S Kensington ST Riverdale IA 52722		600.00	<input type="checkbox"/>
11-05-07	ID# CK#	Bernard Goldstein 4001 Ocean Blvd #801 B Boca Raton FLA 33431		400.00	<input type="checkbox"/>
11-05-07	ID# CK#	Bernard Goldstein 4001 Ocean Blvd #801 B Boca Raton FLA 33431		100.00	<input type="checkbox"/>
11-05-07	ID# CK#	John & Tom Helms 6502 Stonehaven CT DAVENPORT IA 52807		50.00	<input type="checkbox"/>
11-06-07	ID# 6009 CK# 2091	Associated Builders and Contractors of Iowa 475 ALICE RE ST A WINNEMAN IA 50263		100.00	<input type="checkbox"/>
SUB-TOTAL				\$ 1650.00	
TOTAL (If last page of this schedule)				\$	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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(for Schedule A)

RECEIVED

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

(including candidate's personal funds)

Pat Libby Committee

☐ CHECK THIS BOX IF
AMENDING FORM

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 88B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
12-5-07	ID# CK#	MARLIN VOIZ JR 203 W 3RD ST DAVENPORT IA 52602		\$ 25. ⁰⁰	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 25. ⁰⁰	
TOTAL (If last page of this schedule)				\$ 1675. ⁰⁰	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Pat Gibbs Committee

DATE EXPENDED (MM/DD/YY)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10-24-07	ID# Temp 001 CK#	Patrick Gibbs 2110 W 4th ST Davenport Iowa 52802	Reimbursement Postage for kick off flyers	\$ 82.00
10-25-07	ID# Temp 002 CK#	Dore Stevens Jr 2418 N Lincoln Av Davenport IA 52804	Purchase of stock for post card mailer	100.00
10-30-07	ID# Temp 003 CK#	Patrick Gibbs 2110 W 4th ST Davenport Iowa	Reimbursement for Food & Beverage for kick off raffles streaks	148.00
11-02-07	ID# Temp 004 CK#	Bullseye Direct Mail 589 E 53rd St Davenport Iowa 52807	Post Card Mailer	500.88
11-07-07	ID# Temp 005 CK#	The Professional Service Network 736 Federal St Davenport Iowa 52803	Phone call automated	66.06
11-08-07	ID# Temp 006 CK#	Andrew Wilson 2514 E 51st St Davenport Iowa 52803	Computer Lists & Printing	100.00
11-08-07	ID# Temp 007 CK#	Andrew Wilson 2514 E 51st St Davenport Iowa 52803	Computer print Flyers	125.00
11-13-07	ID# Temp 008 CK#	Pat Gibbs 2110 W 4th ST Davenport Iowa 52802	Reimbursement for Food & Beverage for Reception	88.00
SUB-TOTAL				\$ 1259.94
TOTAL (If last page of this schedule)				\$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONEY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Pat Libby Committee

DATE EXPENDED (MM/DD/YY)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
11-13-07	ID# Term CK# 009	Andrew Wilson 2514 E 51st St Des Moines Iowa 50329	Printing Postcards and Door Flyers	\$ 370.00
11-30-07	ID# CK#	QC Bank 1700 N Division St Des Moines Iowa 50302	Service Charge + TAX November	\$ 25
12-31	ID# CK#	QC Bank 1700 N Division St Des Moines Iowa 50302	Service Charge + TAX December	\$ 25
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 380.50
TOTAL (If last page of this schedule)				\$ 1640.44

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(f).)

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(for Schedule B)